



County of San Diego

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Base Station Physicians' Committee
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BASE STATION PHYSICIANS' COMMITTEE MEETING MINUTES

Wednesday, October 21, 2104

Present Members

DeMers, D.O., Gerard – Navy Medical Center SD
Dunford, M.D., Jim – City of San Diego
Haynes, M.D., Bruce – County EMS
Kahn, M.D., Chris – UCSD BHMD
Klingensmith, Todd – SD County Paramedics Assoc.
Levine, M.D., Saul – Sharp Memorial BHMD
Smith, D.O., Ryan – Tri-City BHMD
Wang, M.D., Marcus – Scripps Mercy BHMD
Weinstein, M.D., Steven – Sharp Grossmont
Wiesner, M.D., Christopher – Scripps La Jolla
Workman, R.N., Debi – Paramedic Training Programs

County Staff

Ameng, R.N., Diane
Mahoney, R.N., Meredith
Schoenheit, R.N., Candy
Smith, R.N., Susan
Stepanski, Barbara
Wolchko, Janet I. (Recorder)

In Attendance (cont'd)

Bourdon, R.N., Darlene – Scripps Mercy BHNC
Dotson, R.N., Melody – UCSD
Drum, Daryn – Heartland Fire
Duffy, Jenny – Escondido/San Marcos Fire
Egleson, Clint – Southwest College
Fickas, Lance – Express Ambulance
Gardiner, R.N., Yana – Tri-City Medical Center
Graydon, R.N., Cheryl – Palomar Medical Center
Healy, R.N., Marla – Sharp Memorial
Idman-Gervais, R.N., Dianne – Sharp Grossmont
Rice, Mike – AMR
Rosenberg, R.N., Linda – Sharp Memorial
Russo, R.N., Joe – AMR/CSA-17
Serra, M.D., John – UCSD/Rural/Metro
Snell, James – San Diego Fed Fire
Tomada, Andrea – NMC San Diego
Vilke, Gary – Carlsbad Fire/Rescue
Walker, Chris – Sharp Memorial
Wells, R.N., Christine – Scripps La Jolla BHNC

In Attendance

Aker, Donna Kelly – UCSD ROC
Anderson, R.N., Marilyn – Vista Fire
Anderson, Mary – San Diego Fed Fire
Allington, R.N., Linda – Carlsbad Fire

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Ryan Smith, D.O. called the meeting to order at 11:05 am. Attendees introduced themselves.

II. APPROVAL OF MINUTES

A motion was made by Chris Wiesner, M.D., seconded by Marcus Wang, M.D. to approve the minutes from July 15, 2014. Motion carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

- A. Volumes of ALS transports, number of patients who bypassed the requested hospital, emergency department (ED) saturation, ED bypass and percent of patients bypassed per hospital were given.
- B. Protocol Review: Adult and pediatric protocol review has been done. A summary of the protocol review will be brought to BSPC for discussion.
- C. Fallbrook Hospital has issued a request to drop their basic emergency medical services. The hospital may close as an acute care hospital as well.
 - 1. EMS is required to do impact report and send it to the California Licensing and Certification. The report should be released soon.
 - 2. North County Fire that serves most of the calls in the area feels they will be able to maintain response in the area adequately. Palomar Hospital and Tri-City also feel they will be able to handle any overflow volume.
 - 3. Temecula Valley Hospital in Riverside County impact regarding Stroke and STEMI resources will be considered.
- D. Naloxone trial with the Sheriff Deputies had nine (9) cases reported and is going smooth. Naloxone is being used in the correct circumstances; everyone has had a clinical response to the naloxone.
- E. Public safety regulations that apply to fire fighters, lifeguards and law enforcement went out for public comment on October 20, 2014. The revision will be out in six (6) months.
- F. Prehospital IT assessment has concluded and is waiting for the HP report. The State has established a January 1, 2015 date to switch to Nemsis 3.0. Notification will be sent out as well as additional information.
- G. City of San Diego RFP:
EMS who has local jurisdiction, and providers of ambulance services in the area have a number of mutual operation agreements (MOA's) that are traditionally bid on and reviewed every 10 years for ambulances services in the area and establish the new emergency operations agreement (EOA).

EMSA's review of the City of San Diego Request for Proposal (RFP) has determined that the County of San Diego cannot delegate its authority to the City. The County filed an appeal of the denial to the EMS Commission.
- H. Stroke last known normal time should be reported to the Base Hospital for the hospital to decide what kind of treatment the patient should be given when they arrive. Stroke processes to get tPA have been reviewed.

- I. Issue from the Trauma there have been reports that patient care records are not making it to hospital charts when patients are delivered to the hospital.
- J. Flu season is coming up; people should be encouraged to get vaccinated.
- K. PulsePoint started a few months ago. Dr. Dunford stated that the City of San Diego started PulsePoint on July 30, 2014. Since then there have been 34 alerts of cardiac arrest, four (4) were actual arrests, the rest were dead on scene (DOS), seizures and alcohol wake-ups. Of those who were real cardiac arrests, no lay responses were reported. The fire department 911 reported engine response arrived first, nine (9) out of 10 times.

IV. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)

- A. The Statewide Medical Healthcare exercise on November 20, 2014. The scenario has been changed to Ebola.
- B. October 30, 2014 is the Emergency Care Summit at Scripps La Jolla.
- C. Melody Dotson reported on the Airport drill. Sharp and Mercy Hospital included 100 patients, there were 18 agency ambulances that participated. Transport times were good.
- D. Scripps La Jolla Hospital's is opening new building and will have an active shooter drill, on January 30, 2015.

V. SAN DIEGO HEALTH CONNECT

No report was given

VI. RESUSCITATION OUTCOMES CONSORTIUM (ROC) (Gary Vilke)

The study has 293 patients; total national enrollment in the study was 2,000 to 3,000 people. San Diego is the leader in enrolling eligible patients for the study.

VII. COMMUNITY PARAMEDICINE (CP) REPORT (Linda Allington)

- A. The OSHPD Director expressed concerns on issues brought up at public hearings regarding public safety, treating and data collection. Final decision on the CP projects should be made by November 12, 2014.
- B. Yesterday there was a webinar regarding current projects with LEMSAs. There are 50 project participants all over the country working on performance and standardization benchmarking.
- C. Dr. Dunford added there will be a formal curriculum that the paramedics will receive through UCLA to a local site of 100 to 200 hours of training. The Community Information Exchange (CIE) is being used by San Diego City for the homeless where case coordinators and housing providers are on the same system. NYC awarded Dr. Dunford with the National Highway Traffic Safety Administration (NHTSA) grant for analysis of the limits and challenges of CP in the country. Dr. Dunford will be joining Kevin Munjal, Medical Director of Mount Sinai who is discussing the need of financial reform. There will be some bicoastal sessions on analysis of CP.

VIII. PSYCHIATRIC CASE (D. Neison, M.D.)

Dr. Neison was not present.

IX. EBOLA (Bruce Haynes, M.D.)

- A. In August, EMS distributed guidance in conjunction with one of the CAHAN alert regarding assessment, diagnosis and treatment of the Ebola disease. The guidance included recommendations for personal protective equipment (PPE), how to identify the patient, and included taking a travel history. Frequently asked questions will be posted.
- B. The CDC in response to two nurses in Dallas that contracted Ebola has a new guidance on personal protective equipment (PPE). Additional elements to the guidance include:
 - 1. Site manager responsibility making sure there is no contamination.
 - 2. Trained observers to monitor for correct PPE use and safe work practices.
 - 3. Designated areas for Donning and Doffing (D&D) for the hospitals which will be adopted for field use.
 - 4. PPE for observers who are watching people providing the nursing care.
 - 5. The CDC Website has the guidance.
- C. The Ebola outbreak is the largest that has occurred outside of the Democratic Republic of Congo. Countries affected are:
 - 1. Guinea
 - 2. Liberia
 - 3. Sierra Leone
 - 4. Nigeria and Senegal due to their Public Health practice are off the list of countries for suspected watch.

There are 9,200 suspect/probable and confirmed cases of Ebola reported with 4,500 deaths. Cases are leveling off in some of the areas. Documents are distributed to the people in the areas to try to limit them in some of the practices that may have caused the outbreak of Ebola such as bush hunting of infected meats and cultural burial practices of contact with the person who has died.

- D. Guidelines include recognizing symptoms, screening at departure and arrival in airports. Atlanta, Omaha and the National Institutes of Health (NIH) have specialized treatment centers.
- E. Review of the illness and travel history is important. PHS epidemiology stresses getting a travel history. Symptoms start with a fever of 100.4 or higher. The CDC website has documents that can be used to guide your approach and a check off list to assess a patient.
- F. Call Public Health Epidemiology (EPI) on possible Ebola cases going over risk factors and travel history. Contact numbers are 619-692-8499 (day), after hours and weekends 858-565-5255.
- G. Blood tests are sent to Los Angeles and CDC in Atlanta. A second testing should be done, there should be no physical contact without PPE, do not neglect the patient's medical needs and look for alternative diagnosis, and do not perform elective tests or procedures. The original guidance states to limit the number of procedures that might cause aerosolization and cause the medics to be exposed unnecessarily.

20 CDC
quarantine
sections

H. Comments and discussion topics:

1. Linda Rosenberg R.N. stated that there was a conference call yesterday that focused on leadership of EMS, ambulance transport teams, DPH and CDC lab. CDC lab confirmation turnaround is two (2) to three (3) days. PPE level of protection was covered.
2. San Diego County OES released their concept of operations this morning. They also issued a fact sheet on 10 things to know about Ebola and frequently asked questions.
3. There is guidance in the CDC documents regarding cleaning of ambulances, screening at the border, cruise ship terminals and airport. San Diego has a quarantine office at the Public Health Services offices with CDC officers. There are ~~20~~ CDC centers in the US. County health resources are available as well as facilities, receiving centers and training.
4. Discussion ensued on PPE, goggles, shoe covers, clothing decontamination and disposal, training on D&D, hazmat training and ambulance level of protection. Dr. Haynes stated that the PH epidemiology section and Dr. McDonald are involved in the process. Facilities should have hazmat PPE. An update was received less than 12 hours ago on recommended PPE, which will be reviewed, update and sent out by EMS/PHS.
5. Inquiries included delayed entry and clarification of stabilization, stable versus unstable patient. Also, questions as to limited access to the patient, who is medical control and a check list distribution.

X. ITEMS FOR FUTURE DISCUSSION

Ebola updates.

XI. SET NEXT MEETING/ADJOURNMENT

The next Base Station Physicians' Committee meeting is scheduled for November 18, 2014 in the Sharp Spectrum Auditorium. The meeting was adjourned at 12:25 p.m.

